

PTO/SB/21 (08-03)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/608,265	
	Filing Date	June 27, 2003	
	First Named Inventor	Ralph F. Kalies	
	Art Unit	3626	
	Examiner Name		
Total Number of Pages in This Submission	8	Attorney Docket Number	036806-434

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Response to Missing Parts/Incomplete Application	The Commissioner is hereby authorized to charge any additional fees required (including the fee for any extension of time), or to credit any overpayment, to Deposit Acct. No.: 20-0809.	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Thompson Hine LLP 2000 Courthouse Plaza N.E., 10 West Second Street Dayton, Ohio 45402-1758
Signature	
Date	3-26-2004

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	Michael A. Forhan, Reg. No. 46,706
Signature	
Date	3-26-2004

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Applicant(s) : Ralph F. Kalies
Appln. No. : 10/608,265
Filed : June 27, 2003
Title : METHOD FOR CONDUCTING PRESCRIPTION DRUG
CO-PAYMENT PLANS
Art Unit : 3626
Docket No. : 036806-434

Commissioner for Patent
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

POWER OF ATTORNEY

All right, title, and interest in the above-identified patent application has been assigned to Omnicare, Inc., from the inventor, Ralph F. Kalies, by virtue of the Assignment recorded with the U.S. Patent and Trademark Office on March 4, 2004 at Reel 014396 / Frame 0409 (copy attached).

The undersigned, as Vice President of Omnicare, Inc., has reviewed the evidentiary documents for the above-identified patent application and hereby certifies that to the best of his knowledge and belief, all right, title, and interest in and to the above-identified application is in the name of Omnicare, Inc., the party seeking to take this action.

On behalf of Assignee and owner of the above-identified U.S. patent application, by assignment, Omnicare, Inc. hereby appoints:

Mark P. Levy	Reg. No. 27,922
Theodore D. Lienesch	Reg. No. 28,235
Douglas E. Erickson	Reg. No. 29,530
Michael A. Forhan	Reg. No. 46,706
Michael J. Nieberding	Reg. No. 39,316
Steven J. Elleman	Reg. No. 41,733
John F. Kane	Reg. No. 44,815
Rose Ann Dabek	Reg. No. 28,064
Jeffrey C. Metzcar	Reg. No. 52,027
Rodney M. Young	Reg. No. 40,882
Victor J. Wasyllyna	Reg. No. 52,345

as its attorneys with full power of substitution and revocation, to transact all business in the U.S. Patent and Trademark Office connected therewith.

Address all correspondence and telephone calls to:

Michael A. Forhan, Esq.
Thompson Hine, LLP
2000 Courthouse Plaza NE
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Dayton, Ohio 45402-1758
Telephone: (937) 443-6847
Facsimile: (937) 443-6635

I, Regis T. Robbins declare that all statements made herein of my own knowledge are true, and that all statements made on information and belief are believed to be true; and further, that the statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001, Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

OMNICARE, INC.

Date: 3/19/04

By: 

**Regis T. Robbins
Vice President**

#330972



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Patent and Trademark Office
ASSISTANT SECRETARY AND COMMISSIONER
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MARCH 08, 2004

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THOMPSON HINE LLP
MICHAEL A. FORHAN
2000 COURTHOUSE PLAZA NE
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DAYTON, OH 45402

UNITED STATES PATENT AND TRADEMARK OFFICE
NOTICE OF RECORDATION OF ASSIGNMENT DOCUMENT

THE ENCLOSED DOCUMENT HAS BEEN RECORDED BY THE ASSIGNMENT DIVISION OF THE U.S. PATENT AND TRADEMARK OFFICE. A COMPLETE MICROFILM COPY IS AVAILABLE AT THE ASSIGNMENT SEARCH ROOM ON THE REEL AND FRAME NUMBER REFERENCED BELOW.

PLEASE REVIEW ALL INFORMATION CONTAINED ON THIS NOTICE. THE INFORMATION CONTAINED ON THIS RECORDATION NOTICE REFLECTS THE DATA PRESENT IN THE PATENT AND TRADEMARK ASSIGNMENT SYSTEM. IF YOU SHOULD FIND ANY ERRORS OR HAVE QUESTIONS CONCERNING THIS NOTICE, YOU MAY CONTACT THE EMPLOYEE WHOSE NAME APPEARS ON THIS NOTICE AT 703-308-9723. PLEASE SEND REQUEST FOR CORRECTION TO: U.S. PATENT AND TRADEMARK OFFICE, ASSIGNMENT DIVISION, BOX ASSIGNMENTS, CG-4, 1213 JEFFERSON DAVIS HWY, SUITE 320, WASHINGTON, D.C. 20231.

RECORDATION DATE: 03/04/2004

REEL/FRAME: 014396/0409
NUMBER OF PAGES: 3

BRIEF: ASSIGNMENT OF ASSIGNOR'S INTEREST (SEE DOCUMENT FOR DETAILS).

ASSIGNOR:

KALIES, RALPH F.

DOC DATE: 10/14/2002

ASSIGNEE:

OMNICARE, INC.
100 EAST RIVERCENTER BLVD.
1600 RIVERCENTER II
COVINGTON, KENTUCKY 41011

SERIAL NUMBER: 10608265
PATENT NUMBER:

FILING DATE: 06/27/2003
ISSUE DATE:

014396/0409 PAGE 2

JEEVON JONES, EXAMINER
ASSIGNMENT DIVISION
OFFICE OF PUBLIC RECORDS

OPR/ASSIGNMENTS

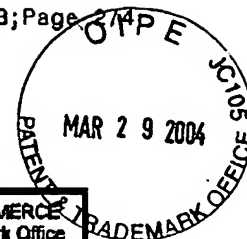
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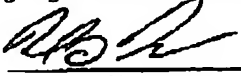
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Docket No. 036806-434



Form PTO-1595 (Rev. 03/01) OMB No. 0851-0027 (exp. 5/31/2002) Tab settings		RECORDATION FORM COVER SHEET PATENTS ONLY		U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office	
To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.					
1. Name of conveying party(ies): Ralph F. Kalics			2. Name and address of receiving party(ies) Name: <u>Omnicare, Inc.</u> Internal Address: _____ _____ Street Address: <u>1600 RiverCenter II</u> <u>100 East RiverCenter Blvd.</u> City: <u>Covington</u> State: <u>KY</u> Zip: <u>41011</u>		
Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____					
Execution Date: <u>October 14, 2002</u>					
4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application is: _____					
A. Patent Application No.(s) <u>10/608,265</u>			B. Patent No.(s) 		
Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>Michael A. Forhan</u> Internal Address: <u>Thompson Hine LLP</u> <u>2000 Courthouse Plaza NE</u> Street Address: <u>10 West Second Street</u> City: <u>Dayton</u> State: <u>OH</u> Zip: <u>45402</u>			6. Total number of applications and patents involved: <u>1</u>		
			7. Total fee (37 CFR 3.41).....\$ <u>40.00</u> <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account		
			8. Deposit account number: <u>20-0809</u> (Attach duplicate copy of this page if paying by deposit account)		
DO NOT USE THIS SPACE					
9. Statement and signature. <i>To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.</i>					
Michael A. Forhan, Reg. 46,706 Name of Person Signing			 Signature		<u>3-3-2004</u> Date
Total number of pages including cover sheet, attachments, and documents: <u>3</u>					

Mail documents to be recorded with required cover sheet information to:
Commissioner of Patents & Trademarks, Box Assignments
Washington, D.C. 20231

C.H. \$40.00 200805 10608265

**Assignment of Rights in Invention
(Sole inventor; single assignee)**

Docket No.
036806.00393

Inventor	Residence of Inventor
Ralph F. Kalies	5770 Kumbier Road Picket, WI 54964
Assignee	Residence or Principal Place of Business of Assignee
Omnicare, Inc.	1600 Rivercenter II 100 East Rivercenter Blvd. Covington, KY 41011

Whereas, I, the above-identified Inventor, have invented certain new and useful improvements in:
IMPROVED PRESCRIPTION DRUG CO-PAYMENT PLAN Serial No. 60/392,066

(hereinafter referred to as "Invention") for which I am making application for Letters Patent in the United States of America;

And, whereas I desire to assign a 100% undivided interest in said Invention, said application disclosing the Invention and any Letters Patent which may be granted therefor to the above-identified Assignee, and whereas said Assignee is desirous of acquiring the entire right, title and interest in the same;

Now, this indenture witnesseth, that for the sum of **ONE** *dollars (\$*
1 *), and other good and valuable consideration, the receipt whereof is hereby acknowledged;*

I hereby assign, sell and transfer a 100% undivided interest in said invention, said application, including any divisions, continuations, and continuations-in-part thereof, and in and to any and all Letters Patent of the United States, and countries foreign thereto, which may be granted for said Invention, and in and to any and all priority rights, Convention rights, and other benefits accruing or to accrue to me with respect to the filing of applications for patents or securing of patents in the United States and countries foreign thereto, unto said Assignee;

And I hereby authorize and request the Commissioner of Patents and Trademarks to issue said United States Letters Patent to said Assignee, as assignee of the whole right, title and interest thereto;

And I further agree to execute all necessary and lawful future documents, including assignments in favor of Assignee, or its designees as Assignee or its Assignees may from time-to-time present to me in order to perfect title in said Invention, modifications, and improvements in said Invention, applications and Letters Patent of the United States and countries foreign thereto;

Assignment of Rights in Invention
(Sole inventor; single assignee)

Docket No.
036806.00393

Inventor	Residence of Inventor
Ralph F. Kalies	5770 Kumbier Road Picket, WI 54964
Assignee	Residence or Principal Place of Business of Assignee
Omnicare, Inc.	1600 Rivercenter II 100 East Rivercenter Blvd. Covington, KY 41011

And I further agree to sign and properly execute such necessary and lawful papers for application for foreign patents, for filing divisions, continuations and continuations-in-part of said application for patent, and/or, for obtaining any reissue or reissues of any Letters Patent which may be granted for my aforesaid Invention, as the Assignee thereof shall hereafter require and prepare at its own expense.

Executed this 14 day of Oct, in the year 2002
at Cincinnati

State of Ohio

County of Hamilton

Ralph F. Kalies
(Signature of Inventor)

Before me personally appeared Ralph F. Kalies
who acknowledged the foregoing instrument to be a free act and deed and also represented that he or she is authorized to execute the same this 14th day of October, in the year 2002.



JAMES R. ELEY, Attorney At Law
NOTARY PUBLIC, STATE OF OHIO
My commission has no expiration date.
Section 147.03 R.C.

James R. Eley
(Notary Public)